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Commissioner for Patents, P.O. Box 1450,
Alexandria, VA 22313-1450
on November 20, 2003

Date of Deposit

Kent E. Genin

Name of applicant, assignee or Registered Representative

Date of Signature

Our Case No. 3614/171

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: Unknown

Group Art Unit No. 3762

In re Application of:

V. Chow et al.

Serial No. 10/600,404

Filing Date: June 20, 2003

For MULTI-PHASIC

MICROPHOTODIODE RETINAL

**IMPLANT AND ADAPTIVE** 

**IMAGING RETINAL STIMULATION** 

SYSTEM

## REQUEST FOR CORRECTION OF FILING RECEIPT

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Attention:

**Application Processing Division** 

**Customer Correction Branch** 

Sir:

Applicant requests the issuance of a corrected filing receipt (copy enclosed) for the above-referenced patent application, and in support of this request respectfully states:

### TITLE

Please delete the word "imagning" and replace with the word -imaging--.

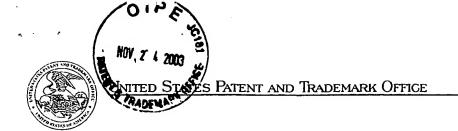
As the title was correctly spelled in both the declaration form and the application transmittal form, Applicant submits that this error was made by the Patent and Trademark Office and that no fees are due. However, if any fees are necessary, the Commissioner is hereby authorized to charge any fees required to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Kent<sup>E</sup>. Genin

Registration No. 37,834 Attorney for Applicant

BRINKS HOFER GILSON & LIONE P.O. BOX 10395 CHICAGO, ILLINOIS 60610 (312) 321-4200



UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS P.O. Box 1450 Alexandria, Virginia 22313-1450

APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/600,404	06/20/2003	3762	384	3614/171	22	21	2

**CONFIRMATION NO. 9763** 

**FILING RECEIPT** 

\*OC00000010872002\*

Date Mailed: 09/15/2003

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit

any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Vincent J. Gnoffo

P.O.BOX 10395

CHICAGO, IL 60610

**BRINKS HOFER GILSON & LIONE** 

Vincent Chow, Hanover Park, IL; Alan Y. Chow, Wheaton, IL;

**Assignment For Published Patent Application** 

Optobionics Corporation;

### Domestic Priority data as claimed by applicant

This application is a CON of 09/824,519 04/02/2001 PAT 6,611,716 which is a CON of 09/100.336 03/26/1998 PAT 6.230.057 which is a CON of 08/642,702 06/03/1996 ABN which is a CIP of 08/465,766 06/06/1995 PAT 5,895,415

Foreign Applications

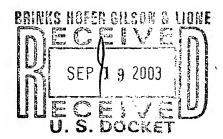
If Required, Foreign Filing License Granted: 09/12/2003

**Projected Publication Date: 12/25/2003** 

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*



Title

Multi-phasic microphotodiode retinal implant and adaptive imagning retinal stimulation system

**Preliminary Class** 

607

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MOV 2 4 2003

a de C	TRANSMITTAL LET	Case No. 3614/171	_	
SEMEDENS!	Filing Date	Examiner	Group Art Unit	
10/600,404	June 20, 2003	Unknown	3762	
Inventor(s)	* -			
V. Chow et al.				
Title of Invention				
Multi-Phasic Microphoto	diode Retinal Implant And Adaptiv	e Imaging Retinal Stimulation 5	System	

TO THE COMMISSIONER FOR PATENTS										
Receipt.	Transmitted herewith is <u>Transmittal Letter (in duplicate)</u> ; <u>Request for Corrected Filing Receipt (in duplicate)</u> ; <u>Copy of Filing</u> .									
	Small entity status of this application under 37 CFR § 1.27 has been established by verified statement previously submitted.									
	Applicant claims small entity status. See 37 CFR1.27.									
	Petition for amonth extension of time.									
	No additional fee is required.									
	The fee has bee	n calculated	d as shown below:							
						Small	Entity		Other Small	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra		Rate	Add'I Fee	or	Rate	Add'I Fee
Total		Minus				x \$9=			x \$18=	
Indep.		Minus	<u> </u>			x 43=			x \$86=	
First Presentation of Multiple Dep. Claim					+\$145=	<u> </u>	-	+ \$290=		
						Total add'I fee	\$		Total add'l fee	\$
	Please charge Deposit Account No. 23-1925 (BRINKS HOFER GILSON & LIONE) in the amount of \$ A duplicate copy of this sheet is enclosed.									
	A check in the amount of \$ to cover the filing fee is enclosed.									
$\boxtimes$	The Commissioner is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this communication or credit any overpayment to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.									
$\boxtimes$	I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. 23-1925. A duplicate copy of this sheet is enclosed.									
	Respectfully submitted									
	Luth-									
Kent E. Genin / V Registration No. 37,834										
Attorney for Applicant Customer No. 00757 - Brinks Hofer Gilson Lione										
P.O. BO	O, ILLINOIS 6061				J. 00	. o. Billing		Cion	<b>~</b> .	
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11/20/2003										